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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Denali Leadership PAC 2755 Illiamna ADDRESS (number and street) (Check if address is changed) Anchorage 99517 ΑK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mary@goreschroder.us (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00438291 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mary G Gore Type or Print Name of Treasurer Mary G Gore [Electronically Filed] 03 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ndidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	elete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Com	nmittee:	
(d)		· · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	∇	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	progeted fund or party
(f)	X	committee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	Murkowski Victory 2016	09248
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee N	lame	-
Denali Leade	rship PAC	
	ed Organization, Affiliated Committee, Joint Fundraising Representati	ive, or Leadership PAC Sponsor
Murkowski Victory 2	2016	
Mailing Address	228 S WASHINGTON STREET STE 115	
	Alexandria VA CITY STATE	22314
Relationship: Conne	ected Organization Affiliated Committee X Joint Fundraising Represe	_
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	e person in possession of committee
Mary (G Gore	
Mailing Address	2755 Illiamna	
-		
	Anchorage	99517
Title or Position	CITY STATE	ZIP CODE
Custodian	Telephone number	907 - 868 - 0837
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committ g., assistant treasurer).	tee; and the name and address of
Full Name Mary 0 of Treasurer	G Gore	
Mailing Address	2755 Illiamna	
	Anchorage AK CITY STATE	99517 ZIP CODE
Title or Position Treasurer	CITY STATE Telephone number	907 - 868 - 0837

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Full Name of Designated	Carol Sturgulewski	
Agent		
Mailing Address	5120 Manytell Avenue	
	Anchorage AK 99516	- -
	CITY STATE :	ZIP CODE
Title or Position Asistant Treasu	rer Telephone number	
Banks or Othor	Depositories: List all hanks or other depositories in which the committee deposits funds, holds	accounts rents
safety deposit be Name of Bank,	First Bank	accounts, rents
safety deposit be	poxes or maintains funds. Depository, etc. First Bank PO Box 7920	accounts, rents
safety deposit be Name of Bank,	poxes or maintains funds. Depository, etc. First Bank PO Box 7920	accounts, rents
safety deposit be Name of Bank,	PO Box 7920 Ketchikan Ketchikan AK Possitory, etc. Ketchikan	accounts, rents
safety deposit b Name of Bank,	PO Box 7920 Ketchikan CITY STATE	
safety deposit be Name of Bank, Mailing Address	PO Box 7920 Ketchikan CITY STATE	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. First Bank PO Box 7920 Ketchikan CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. First Bank PO Box 7920 Ketchikan CITY STATE Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc. First Bank PO Box 7920 Ketchikan CITY STATE Depository, etc.	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Senator Lisa Murkowski 709 Hart Senate Building Mailing Address Washington DC 20510 **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number